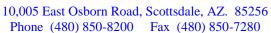


SALT RIVER PIMA-MARICOPA INDIAN COMMUNITY POLICE DEPARTMENT

CITIZEN OBSERVER PROGRAM APPLICATION AND RELEASE OF LIABILITY





OUR MISSION: "SERVICE, RESPECT, PROFESSIONALISM and DEDICATION"

NAME (Last, First, Middle)		D	ATE OF BIRTH	
,				
ADDRESS		TELEPHO	NE #	
EMPLOYMENT OR ORGANIZATION	ANY DISABILITIE DESCRIBE:	ES?	Yes 🗆 No	
DAYS/TIMES/DICTRICT of TOUR DESIRED:				
DAYS: TIMES:	AREA:			
-POLICE DEPARTMENT USE ONLY-				
NAME of SUPERVISOR REVIEWING FORM	RECORDS CHECK COMI DATE COMPLETED:	PLETED by	(name/badge#)	
	10-29 / 250 NEGATIVE:	□ YES □	NO	
NAME of PSB STAFF MEMBER REVIEWING FORM	1 □ Approved	□ Disaprov	Date /ed	
CHIEF OF POLICE or Designee			Date	
•	☐ Approved	☐ Disaprov	⁄e	
TO BE COMPLETED by OFFICER	DATE of RIDE	ASSIGNI	ED OFFICER/BADGE#	
Having requested to voluntarily participate in the Salt River Police Department Citizen Observer Program, I hereby agree to assume all risks and release and agree to hold harmless the Salt River Pima-Maricopa Indian Community and the Salt River Police Department, its employees and agents from any and all liability for any damage or injury which I may receive while riding with the Salt River Police Department Officers.				
This release and waiver of liability of the Salt River Pima- employees and agents shall apply to any right of action t Further, I am fully aware that I may be voluntarily placin River Police Department.	that might occur to myself, m	y heirs, and	my personal representative.	
DATE SIGNAT				
	(Sign in	Officer's pr	esence)	
WITNE	SS:			
TO BE ANSWERED IF THE APPLICANT IS UNDER The minor signing above, have read the above release and versions are the second			uardian or legal custodian of	

SALT RIVER POLICE DEPARTMENT CITIZEN OBSERVER PROGRAM

The Citizen Observer Program was initiated by the Salt River Police Department to allow Community members and citizens the opportunity to observe the duties of Police Officer during regular patrol.

WHO MAY RIDE?

Any person 18 years of age or older may ride after signing a waiver of responsibility.

Juveniles 14 years of age or older may ride after obtaining a clearance and permission from a parent of legal guardian (see waiver.)

LIMITATIONS ON RIDING

Citizens may not ride if they fall into one or more of the following categories:

- 1) A prior felony conviction
- 2) Conviction of a misdemeanor during the preceding 12 months, excluding traffic violations.
- 3) Have a physical handicap, severely limiting the routine of the Officer.
- No more than two persons may ride in a Police vehicle at the same time.
- Participants wishing to ride must be accompanied by a second person, male or female, if they are to ride with an Officer of the opposite sex. They may ride along unaccompanied with an Officer of the same sex.

APPLICATION PROCEDURE

Complete an application and waiver form and leave with a supervisor of the Police Department. A clearance check will be made and you will be contacted within three (05) business days upon review of your application of your ride along.

Identification establishing age will be required. Refusal of inability to produce identification will be sufficient cause to deny the request.

Do's

Participants should report to the Police station at least 15 minutes prior to beginning of the scheduled tour. Except during an incident, feel free to ask questions - - you will be surprised at the types of jurisdiction issues and rules the Officer abides with.

Don'ts

Don't leave patrol vehicle unless directed to do so by the Officer. Don't become involved in any situation the Officer is handling.

Don't enter restricted area within the Department unless accompanied by an Officer.

CONFIDENTIALITY IS A PRIORITY!

Do not discuss any case under investigation. Enjoy your tour and thank you for taking an interest in your Police Department.

EXPLORER'S MUST obtain a Citizen Observer waiver the Monday prior to date you wish to ride along. It must be signed off by parent and placed in the advisor bin before you will be allowed to ride along.

DATE	SIGNATURE	
		(Sign in Officer's presence)
	WITNESS:	

This form must be returned to PSB within three (03) business days